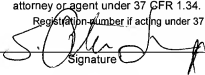


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|   |                        |   |                |
|---|------------------------|---|----------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2009</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H. R. 4818).)</i>                                    |                        | Docket Number (Optional)<br>06670/100J190-US1 |                |
| Application Number  | 09/845,814-Conf. #2311 | Filed   | April 30, 2001 |
| For <b>A SYSTEM AND METHOD FOR ANONYMOUSLY MATCHING PRODUCTS OR SERVICES WITH A CONSUMER</b>  |                        |   |                |
| Art Unit  | 3691                   | Examiner                                      | H. M. Kazimi   |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |                        |   |                |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |                        |   |                |
|   | <u>Fee</u>             | <u>Small Entity Fee</u>                       |                |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$130                  | \$65  | \$ _____       |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   | \$490                  | \$245   | \$ _____       |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1110                 | \$555   | \$ 555.00      |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1730                 | \$865   | \$ _____       |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2350                 | \$1175  | \$ _____       |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.  |                        |   |                |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |                        |   |                |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |                        |   |                |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |                        |   |                |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u> .                 |                        |   |                |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>               |                        |   |                |
| I am the <input type="checkbox"/> applicant/inventor.   |                        |   |                |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |                        |   |                |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>25,351</u>  |                        |   |                |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____  |                        |   |                |
| <br>_____<br>Signature   |                        | July 15, 2009<br>_____<br>Date                |                |
| S. Peter Ludwig<br>_____<br>Typed or printed name   |                        | (212) 527-7700<br>_____<br>Telephone Number   |                |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |                        |   |                |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted.   |                        |   |                |